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Complete if Known Substitute for form 1449/PTO Application Number 10/593,772-Conf. #9154 INFORMATION DISCLOSURE Filing Date September 22, 2006 STATEMENT BY APPLICANT First Named Inventor Go ONO Art Unit 1794 (Use as many sheets as necessary) Examiner Name G. Clark Sheet of Attorney Docket Number 0171-1311PUS1

			U.S. PATE	NT DOCUMENTS	
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA*	US-20040167314-A1	08-26-2004	Yamada et al.	
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Examiner	Cite	Foreign Patent Document	Publication Date	Name of Patentee or	Pages, Columns, Lines,	
Initials*	No. ¹	Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages Or Relevant Figures Appear	T ₆
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Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	CA	International Search Report mailed September 5, 2006	
	CB	Non-Final Office Action mailed April 22, 2010 in Co-Pending Application No. 11/921,419	

Examiner	Date
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